

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

|              |           |             |
|--------------|-----------|-------------|
| SERIAL NO.   | 09/890597 | FILING DATE |
| APPLICANT(S) |           |             |

CLAIMS

|              | AS FILED |      | AFTER<br>1st AMENDMENT |      | AFTER<br>2nd AMENDMENT |      |
|--------------|----------|------|------------------------|------|------------------------|------|
|              | IND.     | DEP. | IND.                   | DEP. | IND.                   | DEP. |
| 1            | /        |      |                        |      |                        |      |
| 2            | /        |      |                        |      |                        |      |
| 3            | 2        |      |                        |      |                        |      |
| 4            |          |      |                        |      |                        |      |
| 5            |          |      |                        |      |                        |      |
| 6            |          |      |                        |      |                        |      |
| 7            |          |      |                        |      |                        |      |
| 8            |          |      |                        |      |                        |      |
| 9            |          |      |                        |      |                        |      |
| 10           |          |      |                        |      |                        |      |
| 11           |          |      |                        |      |                        |      |
| 12           |          |      |                        |      |                        |      |
| 13           |          |      |                        |      |                        |      |
| 14           |          |      |                        |      |                        |      |
| 15           |          |      |                        |      |                        |      |
| 16           |          |      |                        |      |                        |      |
| 17           |          |      |                        |      |                        |      |
| 18           |          |      |                        |      |                        |      |
| 19           |          |      |                        |      |                        |      |
| 20           |          |      |                        |      |                        |      |
| 21           |          |      |                        |      |                        |      |
| 22           |          |      |                        |      |                        |      |
| 23           |          |      |                        |      |                        |      |
| 24           |          |      | V                      |      |                        |      |
| 25           |          |      |                        |      |                        |      |
| 26           |          |      |                        |      |                        |      |
| 27           |          |      |                        |      |                        |      |
| 28           |          |      |                        |      |                        |      |
| 29           |          |      |                        |      |                        |      |
| 30           |          |      |                        |      |                        |      |
| 31           |          |      |                        |      |                        |      |
| 32           |          |      |                        |      |                        |      |
| 33           |          |      |                        |      |                        |      |
| 34           |          |      |                        |      |                        |      |
| 35           |          |      |                        |      |                        |      |
| 36           |          |      |                        |      |                        |      |
| 37           |          |      |                        |      |                        |      |
| 38           |          |      |                        |      |                        |      |
| 39           |          |      |                        |      |                        |      |
| 40           |          |      |                        |      |                        |      |
| 41           |          |      |                        |      |                        |      |
| 42           |          |      |                        |      |                        |      |
| 43           |          |      |                        |      |                        |      |
| 44           |          |      |                        |      |                        |      |
| 45           |          |      |                        |      |                        |      |
| 46           |          |      |                        |      |                        |      |
| 47           |          |      |                        |      |                        |      |
| 48           |          |      |                        |      |                        |      |
| 49           |          |      |                        |      |                        |      |
| 50           |          |      |                        |      |                        |      |
| TOTAL IND.   | /        |      | 2                      |      |                        |      |
| TOTAL DEP.   | /3       | ↔    | 10                     | ↔    |                        |      |
| TOTAL CLAIMS | 14       |      | 12                     |      |                        |      |

|              |   |   |   |
|--------------|---|---|---|
| *            | * | * | * |
| 51           |   |   |   |
| 52           |   |   |   |
| 53           |   |   |   |
| 54           |   |   |   |
| 55           |   |   |   |
| 56           |   |   |   |
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| 80           |   |   |   |
| 81           |   |   |   |
| 82           |   |   |   |
| 83           |   |   |   |
| 84           |   |   |   |
| 85           |   |   |   |
| 86           |   |   |   |
| 87           |   |   |   |
| 88           |   |   |   |
| 89           |   |   |   |
| 90           |   |   |   |
| 91           |   |   |   |
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| 93           |   |   |   |
| 94           |   |   |   |
| 95           |   |   |   |
| 96           |   |   |   |
| 97           |   |   |   |
| 98           |   |   |   |
| 99           |   |   |   |
| 100          |   |   |   |
| TOTAL IND.   |   | ↔ |   |
| TOTAL DEP.   |   | ↔ | ↔ |
| TOTAL CLAIMS |   |   |   |